Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10812535

									700		<u> </u>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR		THAN ENTITY
TOTAL CLAIMS			42					RATE	FEE	٦	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			√2_minus 20=		.22		ı	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		• _		ŀ	V42	-	1		396
MULTIPLE DEPENDENT CLAIM PR							ŀ	X43=		OR	X86=	ļ
<u> </u>								+145=		OR	+290=	·
* If the difference in column 1 is less than zero, enter "0" in column 2						_	TOTAL	=	OR	TOTAL	1166	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL I		
_		CLAIMS		HIGHE		1	r		ADDI	7 1		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus :	. ***		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	CHARLES!		=		X43=	·	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						r	+145=		OR	+290=	
l	18 37						L	TOTAL		I	TOTAL	
			٠				Al	DDIT. FEE	l	OR ,	ADDIT. FEE	
		(Column 1)	42	(Colum		(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***		=		X43=		OR	X86=	-
`	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM			445			000	
,							L	+145=		OR	+290=	•
								TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
		(Column 1)		(Columi	n 2)	(Column 3)		•				
ጀ -		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	700-	
		•					1	145=	ŀ	OR	+290=	
** If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
!! Tì	tne "Highest Nur ne "Highest Num	nber Previously Paid ber Previously Paid	d For" IN THIS For" (Total or	SPACE is lo Independent	ess than) is the l	3, enter "3." highest number f		DIT. FEE L in the appr	opriate box			